PTO/SB/06 (08-03)
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آ		ENT APPLIC	OITAC	RECORD . Application or Docket Number							
Substitute for Form PTO-875 CLAIMS AS FILED PART I (Column 1) (Column 2)							SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	FOR	NUMB	NUMBER FILED		NUMBER EXTRA		RATE	FEE .		RATE	FEE
	SIC FEE CFR 1.16(a))	1						s	OR		s
TO	TAL CLAIMS CFR 1.16(c))		minus 20 =				x s=		OR	x s=	
IND	EPENDENT CLAI CFR 1.16(b))	мѕ	minus 3 =				x \$ =		OR	x \$=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						1	+5 =	1.	OR	+5 =	
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		OR	TOTAL	
CLAIMC AS AMENDED DART II											
CLAIMS AS AMENDED – PART II									OR	OTHE	R THAN
	 	(Column 1)	,	(Column 2) HIGHEST	(Column 3)	1 [SMALL I	ENTITY	1	SMALL	ENTITY
A TN		CLAIMS REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ME	Total (37 CFR 1.16(c))	150	Minus	"152	=		x \$=		OR	x \$=	
AMENDMENT	Independent (37 CFR 1.16(b))	. 3	Minus	··· }	=		x \$=		OR	x s=	
AM	FIRST PRESENT	TATION OF MULTIPL	E DEPEND	ENT CLAIM (37 CF	R 1.16(d))		+s =		OR	+\$ =	
							TOTAL ADD'L FEE		€ OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)											
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.18(c))	•	Minus	••	=	, [x \$=		OR	x s=	٢
EN I	Independent (37 CFR 1.16(b))	•	Minus	•••	=		x \$ =		OR	x \$=	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ \$ =		OR	+ \$=	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)						
ENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
M	Total (37 CFR 1.16(c))	*	Minus	44	=		x \$=		OR	x \$=	
AMENDM	Independent (37 CFR 1.16(b))	•	Minus	***	= ,		x \$=		OR	x \$=	
AM		ATION OF MULTIPLE	E DEPENDE	ENT CLAIM (37 CF	R 1.16(d))		+ s =		OR	+ \$=	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".											

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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